

# Instruction for Completing the National School Lunch Program United States Department of Agriculture 2014 Equipment Grant Application (PI-6201 and PI-6201-SIG)

Download the application and signature form to your personal computer. Fill out the application electronically; use the tab key to move between fields. Print copies of both documents and obtain the necessary signatures.

**Application materials must be POSTMARKED/SENT by December 19, 2014.** Applications **postmarked/sent** after that date **MAY NOT** be considered for funding.

## I. GENERAL INFORMATION

BOX	DIRECTIVE	INSTRUCTIONS
1.	<b>School Food Authority (SFA)</b>	Name of the public district, private school, or residential child care institution.
2.	<b>Agency Code</b>	The SFA agency code can be found on the National School Lunch Program (NSLP) contract with the Wisconsin Department of Public Instruction (DPI).
3.	<b>CESA No.</b>	Cooperative Educational Service Agency (CESA) where your district is located. If unsure please refer to: <a href="http://lbstat.dpi.wi.gov/lbstat_distcesa">http://lbstat.dpi.wi.gov/lbstat_distcesa</a> . For private schools select the CESA for the public district in your community.
4.	<b>DUNS Number</b>	Data Universal Numbering System (DUNS) number, a unique nine-digit identification number, can be found on the NSLP contract with DPI.
5.	<b>SFA Mailing Address <i>Street, City, State, Zip</i></b>	Mailing address of SFA.
6.	<b>Food Service Director or Equivalent</b>	List the first and last name of the SFA food service director. If there is not a food service director, please list the first and last name of the person who is equivalent to a food service director (e.g., head cook, dining services director).
	<b>Salutation</b>	Select the appropriate salutation.
	<b>Title</b>	Name the appropriate title (e.g., food service director, head cook, dining services director).
	<b>E-Mail Address</b>	E-mail address of food service director or equivalent.
	<b>FAX Area/No.</b>	Fax area code and number of food service director or equivalent.
	<b>Telephone Area/No.</b>	Telephone area code and number of food service director or equivalent, include extension number when appropriate.
7.	<b>Grant Contact <i>If other than Food Service Director</i></b>	If an individual, other than the food service director or equivalent, will be the grant coordinator/main contact for grant communication, please list first and last name.
	<b>Salutation</b>	Select the appropriate salutation.
	<b>Title</b>	Name the appropriate title (e.g., teacher, nurse, principal, assistant cook).
	<b>E-Mail Address</b>	E-mail address of grant contact.
	<b>Fax Area/No.</b>	Fax area code and number of grant contact.
	<b>Telephone Area/No.</b>	Telephone area code and number of grant contact, include extension number when appropriate.

BOX	DIRECTIVE	INSTRUCTIONS
8.	<b>District Administrator or School Administrator for Private Schools</b>	List the first and last name of the SFA district administrator for public schools or school administrator for private schools. If this is the same as the Grant Contact, enter 'see above.'
	<b>Salutation</b>	Select the appropriate salutation.
	<b>Title</b>	List the appropriate title.
	<b>E-Mail Address</b>	E-mail of district or school administrator.
	<b>FAX Area/No.</b>	Fax area code and number of district or school administrator.
	<b>Telephone Area/No.</b>	Telephone area code and number of district or school administrator, include extension number when appropriate.
	<b>Address <i>If other than the mailing address provided above.</i></b>	Mailing address of district or school administrator if different than the SFA.
9.	<b>Authorized Representative</b>	Enter the first and last name of the SFA authorized representative.
	<b>Salutation</b>	Select the appropriate salutation.
	<b>Title</b>	List the appropriate title.
	<b>E-Mail Address</b>	E-mail of authorized representative.
	<b>FAX Area/No.</b>	Fax area code and number of authorized representative.
	<b>Telephone Area/No.</b>	Telephone area code and number of authorized representative, include extension number when appropriate.
	<b>Address <i>If other than the mailing address provided above.</i></b>	Mailing address of authorized representative if different than the SFA.
10.	<b>Capitalization Threshold</b>	Enter the amount your agency uses for its capitalization threshold. A 'capitalization threshold' is defined as the dollar value at which an agency differentiates between items that are supplies <b>versus</b> capital equipment. Therefore, some smaller equipment may be considered to be a supply because of its value. Each local school board may designate a specific dollar amount for equipment to capitalize. This is the dollar value at which your school or district considers a piece of equipment an asset in financial statements. <b>Equipment requested for this grant must have a per unit acquisition cost equal to or greater than the value that your local school board has set for its capitalization threshold or \$5,000, whichever is lower.</b>

## II. ELIGIBLE SCHOOLS

<b>School/Building Name</b>	Check NSLP contract for schools listed for your agency. Some buildings may be contracted as more than one school. Include for each school requesting equipment:  1. School name  2. Address
<b>*Sections in gray indicate a CEP reporting prompt</b>	3. Indicate after the school name if this is a Community Eligibility Provision (CEP) school
	<b>Important</b> Complete a row for each school requesting equipment. However, if completing the application for a centralized kitchen (a kitchen that services more than one school), list the school housing the equipment and all schools serviced by the kitchen on a separate copy of the section II page. Make copies of page 2 as needed for this purpose.
<b>As of October 2014 Building Enrollment</b>	Consult the person who submits the NSLP monthly claim for this information. Use the information that was collected to submit your agency's October 2014 NSLP claim.
<b>As of October 2014 Number of Children Approved for Free Meals</b>	If listing a CEP school, multiply the <u>individual school</u> identified student percentage (ISP) by 1.6. Multiply this percentage of free meals by the school enrollment as of October 2014 to obtain the number of Children Approved for Free Meals at this school. The most recently approved school ISP should be used.
<b>As of October 2014 Number of Children Approved for Reduced Price Meals</b>	For CEP schools, enter "0" under "No. of Children Approved for Reduced Price Meals".
<b>Percent Eligible for Free/Reduce Price Meals</b>	Enter information requested. <b>Do not round up.</b> Example: 49.8% would be entered as 49%.  For base or central kitchens, the percentage of students eligible is the total eligible for reduced price/free meals at all schools served from the base/central kitchen divided by the total enrollment for all of these schools.
	If a CEP school, multiply the <u>individual school</u> identified student percentage (ISP) by 1.6. This number is an estimate of the percentage of students eligible for free and reduced price meals within that one CEP school. The most recently approved school ISP should be used.
<b>Programs Offered <i>Check All That Apply</i></b>	Check the boxes for the programs you presently offer.
<b>Food Preparation Source <i>Check All That Apply</i></b>	Check the source the school utilizes for preparation of school meals (FSMC = Food Service Management Company).
<b>School Location <i>Check One</i></b>	Check the box which best describes the community in which the school is located.
<b>Previous Equipment Grant Money Received</b>	Check the box for the year if you received money from one of these equipment grants or check 'None' if you have not received either of these grants.
<b>Direct CEP Reporting Questions to:</b> Jessica Schultz RDN, CD, Nutrition Program Consultant, (608) 266-3296 or Karrie Isaacson, RDN, CD, Assistant Director, (608) 266-2416	

### III. NARRATIVE

#### Type of Equipment and School Building Name

Enter the name of **one** piece of equipment requested **per** row and include the school name where the piece of equipment will reside. If you are requesting more than one of the same pieces of equipment, use one row for each piece of equipment. You may apply to receive up to two (2) pieces of equipment. If you request a second piece of equipment, click on the link on page 4 of the application for additional pages.

If the SFA serves more than 40,000 students, the SFA may request up to four (4) pieces of equipment.

#### Important

- List equipment in the order of priority for your agency.
- When determining which pieces of equipment to request, make sure that equipment is valued **at/or above your agency's capitalization threshold listed on the first page of the application**. Items like school lunch trays, knives, and utensils will not be approved as these are unlikely to be above this amount.
- Equipment must be primarily used for the NSLP.
- Equipment must meet all applicable regulations and codes.
- Grant funds may be used to purchase a vending machine only if it distributes reimbursable meals.

#### Focus Area(s)

Select one or more of the focus areas that purchase of this equipment will impact.

- **Improved Nutritional and Food Quality:** Equipment that lends itself to improving the quality of school foodservice meals that meet the dietary guidelines (e.g., purchasing an equipment alternative to a deep fryer).
- **Increase Locally Grown Fresh Fruits and Vegetables:** Equipment that enables Wisconsin schools to use locally grown fresh fruits and vegetables (e.g., additional refrigeration units, two-compartment produce washing sinks, serving line equipment/salad bars, mechanical potato peelers, mechanical vegetable slicer/choppers).
- **Food Safety:** Equipment that improves the safety of food served in the school meal programs (e.g., cold/hot holding equipment, dish washing equipment, refrigeration, milk coolers, freezers, blast chillers).
- **Energy Efficiency:** Equipment that improves the overall energy efficiency of the school foodservice operations (e.g., purchase of an energy-efficient walk-in freezer replacing an outdated, energy-demanding freezer).
- **Expanded Participation:** Equipment that allows schools to support expanded participation in a school meal program (e.g., equipment for serving meals in a non-traditional setting or to better utilize cafeteria space).
- **Smarter Lunchroom Strategy:** Equipment that assists in meeting Smarter Lunchroom goals (e.g., lunchroom changes that provide more convenience and appeal to the student population, highlighting healthier choices).

#### New or Replacement

Check the appropriate box signifying whether this is a piece of equipment that the school has never had or if it is replacing a present piece of equipment. If it is a replacement, please fill in the age of the present piece of equipment.

#### Percentage of Kitchen Use

Indicate the percentage of kitchen use for each of the following:

- After School Snacks, Fresh Fruit and Vegetable Program, Special Milk Program, Wisconsin School Day Milk Program
- NSLP
- School Breakfast Program
- Other school activities outside of School Nutrition Programs (SNP) and other non school events.
  - Enter an explanation for non SNP events.
  - **Grant awards will be prorated.**

**Narrative Explanation** – The requested equipment should help you implement one or more of the focus areas. Explain. The narrative section will expand to allow you to fully answer these questions. If you are unable to complete this application electronically, you may attach the explanation on a separate sheet of paper. If you need to use a separate sheet of paper be sure to list the SFA name.

Justify your selection for this grant by providing:

- Background data.
- Information to show your degree of need.
- How equipment will have a positive impact on your program.
- If you currently have a similar piece of equipment, include how many your school currently has.
- Funds available to contribute to the cost of the equipment if total cost of equipment exceeds grant award.
- For repair of equipment:
  - Report the cost of maintenance and repair over the past year for present equipment.
  - Provide estimate of cost of repairs versus purchase of new equipment.
  - Include if parts are available to repair old equipment.
- For replacement equipment:
  - Report the cost of maintenance and repair over the past year for present equipment.
  - Provide estimate of what cost would be for repairs versus purchase of new equipment.
  - Include if parts are available to repair old equipment.
  - Include if old equipment will be moved to another school.
  - Include cost of removal of old equipment if this is included in bid.

**Important:** See itemized list below for additional information that should be included for each focus area.

#### **Improved Nutrition and Food Quality**

- Include if your school will create area of additional emphasis (i.e., more fresh fruit and vegetables, less fried foods, etc.).
- List what foods will no longer be served.
- List what new foods will be served.
- Explain what menu changes will be made.

#### **Increase Locally Grown Fresh Fruits and Vegetables**

- Explain what new locally grown fruits and/or vegetables will now be served. Please include planned frequency on menu.
- Estimate time saved because of equipment use.
- Explain if any additional menu changes will be made.

#### **Food Safety**

- Include if there are any Sanitation Inspection orders to update or replace equipment.
- List the age of equipment being replaced.
- Include if the building's current electrical and plumbing systems support the requested equipment.
- Include if the requested equipment has computerized alarm systems or temperature control auto recording.
- Include what national certification the equipment has.

#### **Energy Efficiency**

- Include if the new equipment is Energy Star rated.

#### **Expanded Participation**

- Explain how this equipment will increase NSLP daily participation. Estimate average daily participation increase.
- Explain if the equipment can be used for other school nutrition programs. Estimate participation effect on these programs.

#### **Smarter Lunchroom Strategy**

- Explain how this equipment will help highlight healthier choices.
- Explain how the equipment will improve convenience for the students in selecting healthier meal choices.

## IV. BID SUMMARY

Specifications should be written for each piece of equipment you are applying for prior to asking for bids. Specifications should include a general description, utility requirements, plumbing requirements, mechanical requirements, size or capacity requirements, freight and delivery specifications, installation requirements, and any special instructions. For assistance in writing a specification refer to: Summary Writing Specifications for Food Service Equipment: [http://fns.dpi.wi.gov/files/fns/doc/eq\\_spec\\_sum.doc](http://fns.dpi.wi.gov/files/fns/doc/eq_spec_sum.doc).

For more information and samples refer to National Food Service Management Institute (NFSMI) Resource: *Equipment Purchasing and Facility Design for School Nutrition Programs*, 2009, Chapter 7, page 122, <http://www.nfsmi.org/documentLibraryFiles/PDF/20090312115009.pdf>.

**Include with the application a copy of specifications for this piece of equipment and at least three bids.**

<b>School Food Authority</b>	Name of the public district, private school, or residential child care institution.
<b>Type of Equipment</b>	List a general description of the equipment for the bids in this section, such as Reach in refrigerator. If you are requesting an additional piece of equipment, click on the link at the top of the page ( <a href="#">IV. Bid Summary</a> ) for additional pages.
<b>Name of Vendor</b>	Enter bid for one vendor and one piece of equipment per row.
<b>Date of Contact</b>	<p>Date of bid <b>or</b> if company is declining to give a bid, record the date you contacted them with the request for a bid.</p> <p>Generally, bids are only valid for a specified length of time; part of your specification should ask that bids be valid for six months.</p> <p>Grants are anticipated to be awarded the beginning of May 2015 or soon thereafter.</p>
<b>Equipment Proposed with Manufacturer and Model Numbers</b>	<ul style="list-style-type: none"> <li>• Supply manufacturer name and model number.</li> <li>• Indicate whether a rebate is available and its value if it is.</li> <li>• Indicate if freight, installation, structure/utilities modification (e.g., electrical or plumbing upgrades), accessories, or other expenses related to procurement of equipment are included in the bid.</li> <li>• Installation expenses not included in the bid price quote should also have three quotes unless done by SFA staff. Example: Electrical upgrade by an electrician.</li> </ul>
<b>Quote</b>	<p>Total cost of equipment that includes all expenses itemized in the previous column. Field is formatted for currency unit to appear when you tab out of the field.</p> <p><b>Note:</b> If a rebate is offered, subtract rebate from total cost.</p>
<b>Comments on Equipment Selection</b>	In this section, defend your request for the preferred bid. This is especially important if you are not selecting the bid that is lowest in price.
<b>Preferred Bid</b>	Indicate your preferred bid. There is no guarantee that the bid you select will be allocated for the equipment, therefore, it is extremely important that the comments on equipment selection are comprehensive and convincing to application reviewers.

## Certification / Signature Form (PI-6201-SIG)

**Important:** This form is not protected to allow for acceptance of digitized signatures. Therefore, do not tab through document, rather click in the cell and complete the requested information.

### I. GENERAL INFORMATION

Enter the name of the School Food Authority, the SFA Code, and the SFA Address

### II. CERTIFICATION / SIGNATURES

Please read the entire section.

Enter the names of the District or School Administrator, Food Service Director or Equivalent, and the Authorized Representative.

This section must be signed and dated by the District or School Administrator, the Food Service Director or Equivalent, and the Authorized Representative. Signatures certify that those who have signed this application are in agreement with all information contained within the entire application.

The application will not be considered for funding without signatures.

Enter the dates signed for each signature.

### III. AGREEMENT

Please read the entire section which is continued on the second page.

**Once completed and signed, submit the original and two (2) copies of:**

- 1. Application (PI-6201)**
- 2. Certification / Signature Form (PI-6201-SIG)**
- 3. Equipment specification(s)**
- 4. Bids**

To: Wisconsin Department of Public Instruction  
ATTN: Kathryn Lederhause  
School Nutrition Team  
P.O. Box 7841  
Madison, WI 53707-7841  
Fax: 608-267-0363

If submitting by UPS or FedEx, use this street address:

125 S. Webster St.  
Madison, WI 53703

If submitting by email (electronic signatures and scanned copies of bids and specification are required):

[Kathryn.lederhause@dpi.wi.gov](mailto:Kathryn.lederhause@dpi.wi.gov)

**Applications must be postmarked/sent by December 19, 2014.** Applications postmarked/sent after that date **MAY NOT** be considered for funding.